PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

NSTRUCTIONS: This appropriate. All further of andicated unless correcte maintenance fee notificat	correspondence including displayed by the displayed of th	or transmitting the ISSU g the Patent, advance or erwise in Block 1, by (a	TE FEE and PUBLIC ders and notification) specifying a new of	orrespondence addres	s; and/or	(b) indicating a separ	ould be completed where correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPONDE	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
26389	-	Ce	ertificate	of Mailing or Transr	nission		
1420 FIFTH AV SUITE 2800		NESS, PLLC	I hereby certify that to States Postal Service addressed to the Ma transmitted to the US	this Fee(s) with suff all Stop I PTO (571	Transmittal is being icient postage for first SSUE FEE address) 273-2885, on the da	deposited with the United t class mail in an envelope above, or being facsimile the indicated below.	
SEATTLE, WA	98101-2347					(Depositor's name)	
							(Signature)
			*		(Date)		
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. CONFIRMATION NO.		
10/535,040	12/20/2005	Uwe Reichert	Uwe Reichert BOEH124931 2040				
TITLE OF INVENTION	SOLENOID PLUNGE	R SYSTEM WITH AN A	DJUSTABLE MAG	NETIC FLUX			
APPLN TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	DUE PREV. PAID ISS	UE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	МО	\$1400	\$300	\$0		\$1700	04/10/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS	S			
MULLINS, BURTON S		2834	310-014000				
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list Christensen O'Conn							
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(1) the names of up to 3 registered patent attorneys 1-Johnson Kindness PLLC or agents OR, alternatively,				
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DAT.	A TO BE PRINTED ON	THE PATENT (print	or type)			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
WOCO Industrietechnik GmbH Bad Soden-Salmunster, Germany							
Please check the appropr	iate assignee category of	r categories (will not be p	rinted on the patent):	☐ Individual ☑	Corporation	on or other private gro	oup entity Government
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							
Issue Fee Publication Fee (No small entity discount permitted)			☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.				
Advance Order - # of Copies						equired fee(s), any de	ficiency, or credit any
			overpayment, to	Deposit Account Num	iber U3-	1740 (enclose a	n extra copy of this form).
5. Change in Entity Sta	tus (from status indicate s SMALL ENTITY stat		☐ b. Applicant is p	o longer claiming SM	ALL ENT	TITY status. See 37 CI	FR 1.27(g)(2).
NOTE: The Issue Fee an	d Publication Fee (if rec	mired) will not be accepte	ed from anyone other t	-			ne assignee or other party in
interest as shown by the	HIM AN A	Males Patent and Trademan	k Office.		··········		
Authorized Signature WWW STATE			Date <u>March 6, 2007</u>				
Typed or printed name Kevan L. Morgan			Registration No 42,015				
This collection of inform an application. Confiden	nation is required by 37 (tiality is governed by 35 d application form to the	CFR 1.311. The information of U.S.C. 122 and 37 CFR	on is required to obtain 1.14. This collection when depending upon the	n or retain a benefit by is estimated to take 1 individual case. Any	y the publ 2 minutes comment	ic which is to file (and to complete, including s on the amount of tin	by the USPTO to process) g gathering, preparing, and ne you require to complete

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.